

**North Carolina Department of Health and Human Services  
Division of Mental Health, Developmental Disabilities and Substance Abuse Services**

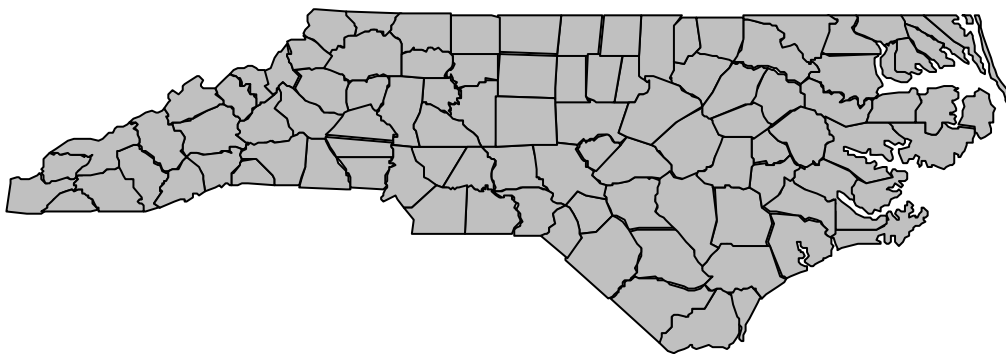
**NC-TOPPS**

North Carolina Treatment Outcomes and Program Performance System

**Adult Mental Health Consumers  
Eastpointe LME**

**Initial Interview Matched to 3-Month Update Interview  
Initial Interviews Conducted: July 1, 2006 through June 30, 2007**

Note: Includes matching Update Interviews through December 2007.



Data Collected By:

Center for Urban Affairs and Community Services (CUACS)  
NC State University  
Mindy McNeely, Project Director

Report Produced By:

Institute for Community-Based Research  
National Development & Research Institutes, Inc. (NDRI)  
Marge Cawley, Project Director  
Gail Craddock, Senior Research Analyst

Prepared For:

Quality Management Team  
Community Policy Management Section  
DMH/DD/SAS  
NC DHHS

February 2008



## Matched Initial/Update Report

This feedback report is available to Local Management Entities, providers and the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services on data gathered for mental health consumers through the North Carolina Treatment Outcomes and Program Performance System (NC-TOPPS). This report provides information gathered through the online NC-TOPPS Initial and Update Interviews. It provides six or seven pages of charts, tables and text information on consumers' demographic characteristics, symptoms, behaviors and activities, service needs, supports and barriers, family and housing issues and outcome measures collected through an interview with the consumer during treatment. It should be noted that not every data element or response category on the NC-TOPPS Interviews are displayed in this report.

Please note that the charts and tables may not always match online queries that you may conduct. The data used in these reports will not necessarily reflect the same points in time. In addition, NDRI who produces these reports cleans the data and removes apparent duplicates prior to preparing the tables and charts.

Additional information about NC-TOPPS and pdf copies of the online NC-TOPPS interviews are located at:

<http://nctopps.ncdmh.net/>

## General Information on Interpreting Tables

<b>Types of Statistics</b>	<ul style="list-style-type: none"><li>▶ A <u>count</u> shows the actual number (often designated by the letter "n") of clients.</li><li>▶ A <u>percentage</u> is the number of clients with a characteristic or behavior divided by all the clients in the group of interest multiplied by 100. Percentages will be designated with a % sign next to the number.</li><li>▶ An <u>average</u> is the sum of a set of numbers divided by the number of numbers in the set. When a number in a cell is an average, the word average will appear in the row descriptor.</li><li>▶ A <u>median</u> is the middle number in a set of numbers, arranged from lowest to highest. For example, the median for the following numbers: 9, 12, 12, 15, 17, 20, <b>22</b>, 23, 25, 28, 31, 35, 62 is the bolded number, 22. Medians are important measures of central tendency, especially when a mean may be skewed by a very high or very low value. When a number in a cell is a median, the word median will appear in the row descriptor.</li></ul>
<b>Missing Data</b>	For many of the NC-TOPPS forms entered, a particular item or question may have been left blank. In calculating the means, medians, and percentages in cells of questionnaire items, this missing data is excluded from the calculation. For example, program X may have submitted 50 interviews but in 2 of the interviews, gender was left blank. When the percent of males is calculated, the 25 males are shown as 52% ( $25/48 \times 100$ ).
<b>Denominator</b>	The denominator for nearly all percentages is the number of cases shown on the bottom left of the page minus item missing data. All exceptions to this general rule are <b>specifically noted</b> with appropriate text in the graphic or table. This text will state which group is included or excluded from the denominator, such as "of those in the labor force" or "of those with children."
<b>Multiple Response</b>	"Multiple response" indicates a "mark all that apply" type question in which more than one response to a question is allowed. The total of responses may add to greater than 100%. Examples are health insurance or target population. This is in contrast to items such as gender where only a single response is allowed.
<b>Time periods of behaviors measured</b>	Behaviors are measured at several time periods including the past year, the past 6-months, the past 3-months, the past month, or since last assessment. For the Initial Assessments, the time periods can generally be construed to mean the time period before treatment begins. For the Update Assessments the time is measured from the time at which the interview occurs back one month, 3-months, or since the last assessment.
<b>Definitions of terms</b>	The Appendix at the end of the report gives definitions of acronyms, abbreviations, and other terms used in this report.
<b>Notes:</b>	Mental Health consumers who are also being treated for substance abuse (co-occurring) are included in this report.



**Eastpointe Adult Mental Health Consumers**  
**Initial Interview Matched to 3-Month Update Interview**  
**Initials Conducted July 1, 2006 through June 30, 2007**

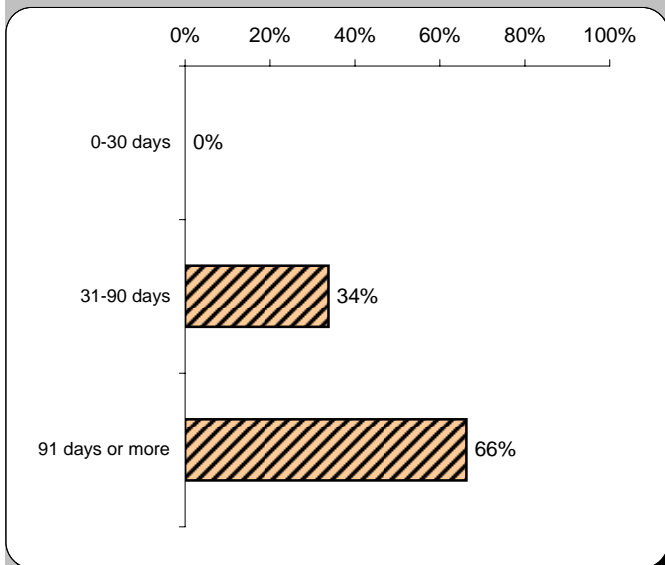
This table shows the number of matched consumers in this report by provider. This is the number of Initials done during the fiscal year 2006-2007 for whom there was a 3-month update interview conducted by December 31, 2007.

Provider	City	ProviderID	Number
ACTS, Inc.	Beulaville	2097	4
ACTS, Inc.	Clinton	1289	2
ACTS, Inc.	Fayetteville	1633	40
ACTS, Inc.	Kenansville	2332	1
ACTS, Inc.	Kinston	2099	3
Alpha Omega Health, Inc.	Kenansville	1956	2
Alpha Omega Health, Inc.	Wilmington	563	7
Ambleside	Kinston	1254	1
Area Services and Programs	Warsaw	714	11
CNC Access/Health Services Personnel	Kinston	830	32
CNC/Access	Goldsboro	1243	5
CNC/Access	Warsaw	705	3
Candii Homes	Clinton	1902	1
Carolina Focus	Kinston	1495	2
Carolina Residential Services	Garner	1702	1
Cedar Grove Group Home	Goldsboro	1183	1
Christian's House of Hope, Inc.	Willard	2123	2
Community Alternatives (Educare)	New Bern	1881	2
Community Care Center, Inc.	Kinston	1867	1
Coordinated Health Services	Kinston	542	3
Easter Seals UCP/Area Services and Programs	Clinton	759	1
Easter Seals UCP/Area Services and Programs	Goldsboro	590	11
Eastpointe - Duplin	Kenansville	12	2
Eastpointe - Lenoir	Kinston	31	2
Elite Care, Inc.	Williamston	2037	1
Essential	Kenansville	2524	1
Family First Support Center, Inc.	Mt Olive	1606	1
Family Works Psychological Center	Wilmington	558	19
HUGGS/Peterkin and Associates	Fayetteville	1919	6
Hawthorne Services	Goldsboro	1182	6
Healthcare Connections of the Carolinas	Roseboro	2056	5
Helping Hands Care Manangement	Rose Hill	1587	1
Hope In The Carolina	Roseboro	1620	2
Hope of Sampson County	Clinton	1200	1
Howell Support Services	Goldsboro	741	9
Howell Support Services	Warsaw	740	1
Kristi's Homes, Inc.	Kinston	1437	3
Life, Inc.	Goldsboro	376	17
Life, Inc.	Kenansville	1163	6
Mary's Loving Arms Adult Care	Kinston	1980	1
May Frances Partnership in Caring	Snow Hill	1480	1
NC Mentor Network	Goldsboro	1868	1
Neuse Enterprises, Inc.	Kinston	1312	6
PORT Human Services	Kinston	1224	9
Preferred Alternatives, Inc.	Goldsboro	2088	4
Preferred Alternatives, Inc.	New Bern	1643	3
Professional Group Living	Clinton	1847	5
Professional Group Living	Durham	1871	2
RASS, Inc.	Warsaw	1002	8
S and M Group Services	Greenville	1889	4
Skill Creations, Inc.	Wilson	1085	2
Tar Heel Human Services - MH Division, Inc.	Beulaville	636	50
The Lawsons House	Harrells, Wallace	1511	9
Upscales Residential Care	Roseboro	1300	9
Visions of Care	Goldsboro	1940	6
WATCH (What About the Children)	Warsaw	1941	2
Waynesboro Family Clinic	Goldsboro	1241	92
Whitfield Homes, Inc.	Clinton	1246	2
Total			435

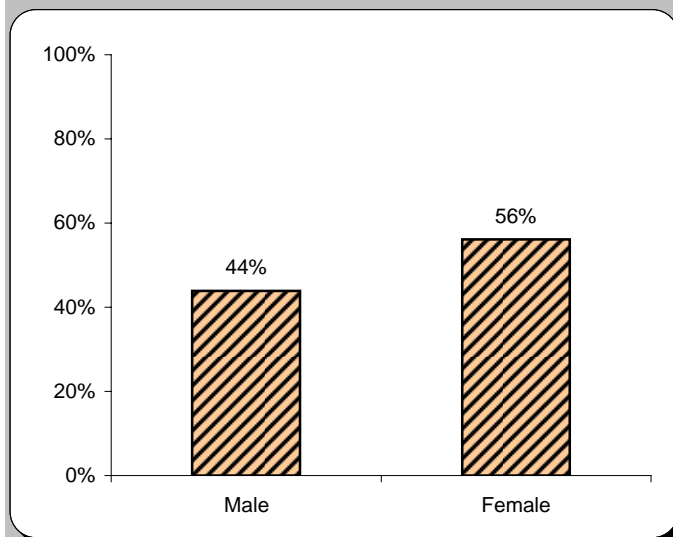
## Part I

Part I of this report includes descriptive information about the Initial Interview Matched to 3-Month Update Interview consumers. This information on the types of consumers, time in treatment, types of services needed and being rendered helps in understanding the behavioral changes shown in Part II and Part III of this report.

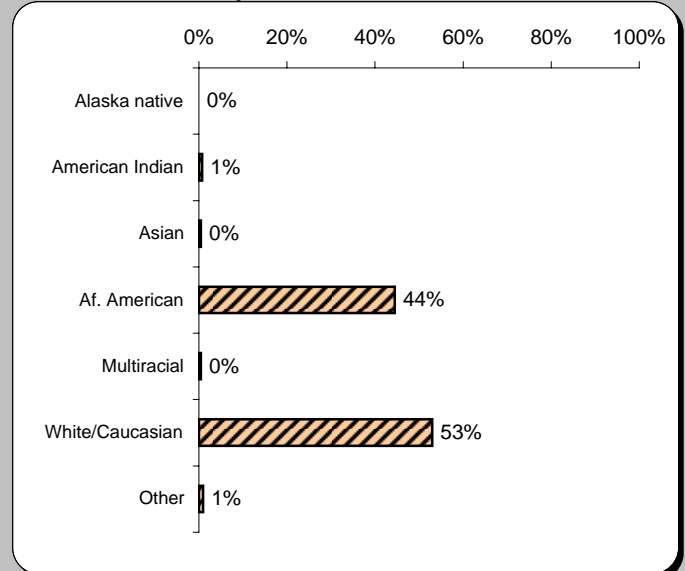
### 1-1: Days Between Initial and Update Interview



### 1-2: Gender



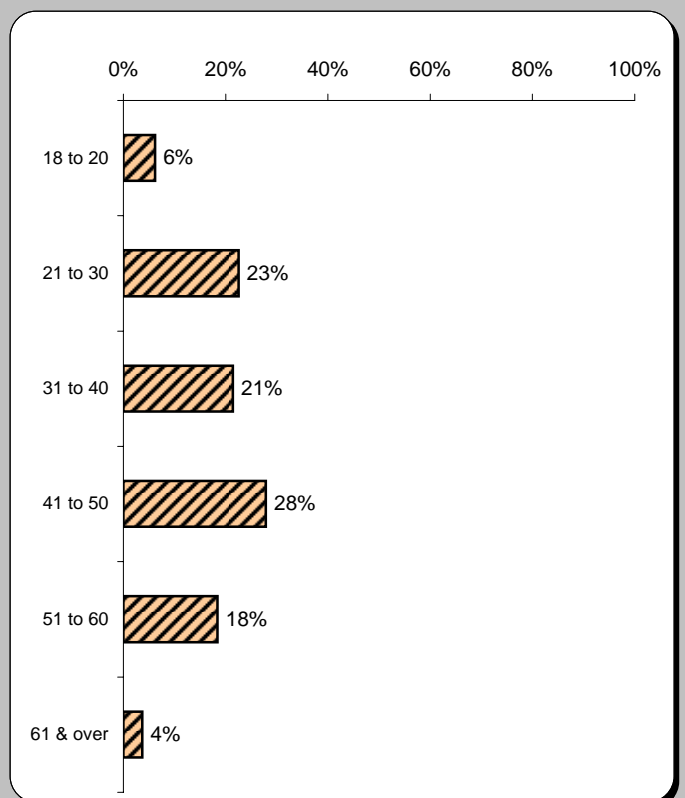
### 1-3: Race/Ethnicity



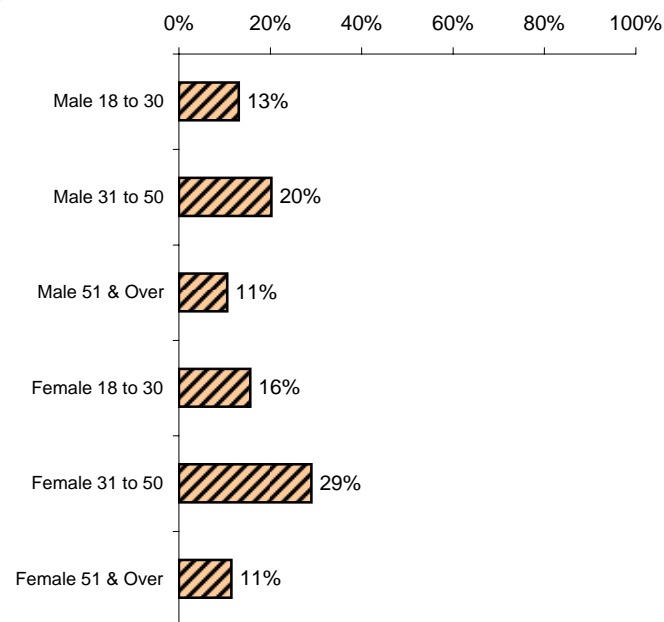
### 1-4: Hispanic

2% of Eastpointe consumers are Hispanic.

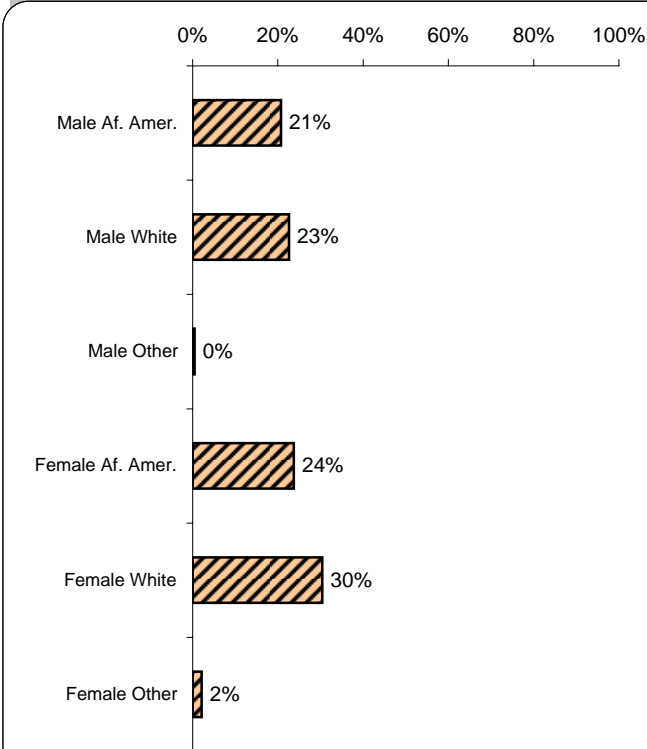
### 1-5: Age Group



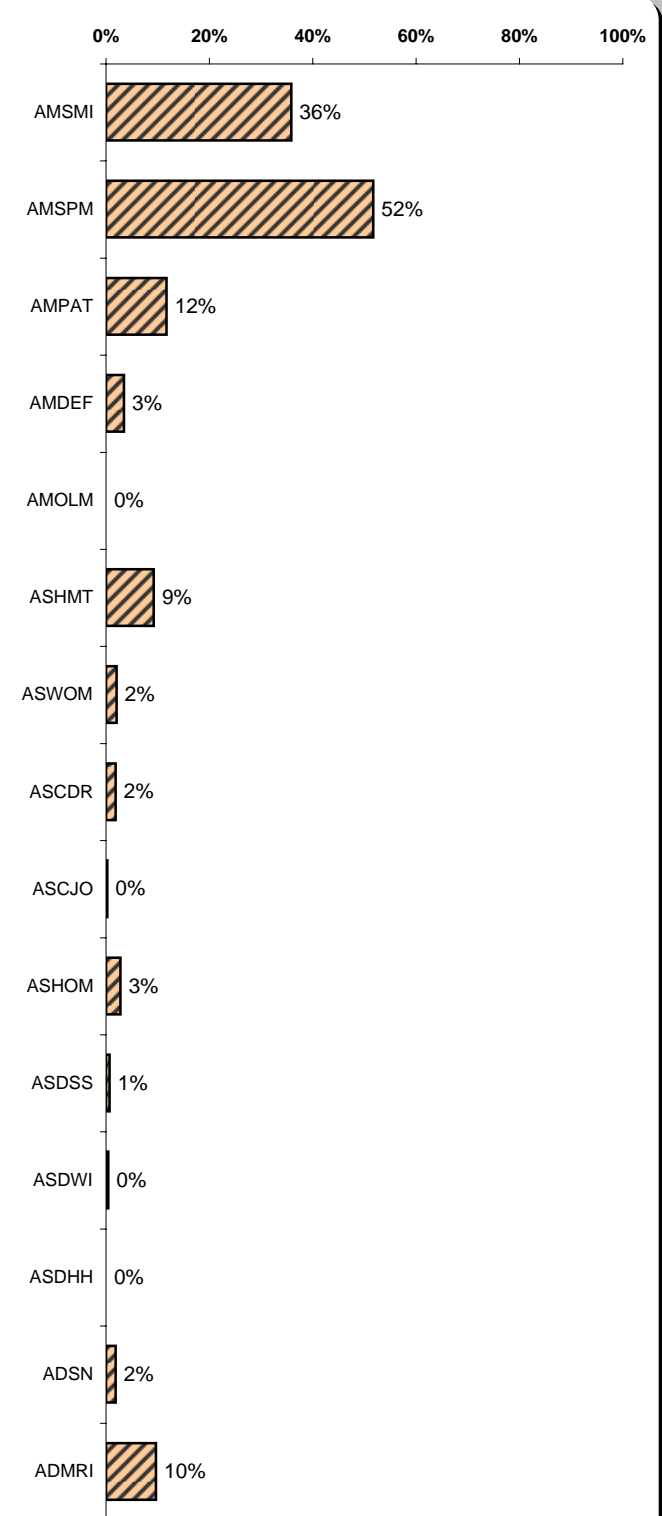
## 2-1: Gender and Age



## 2-2: Gender and Ethnicity

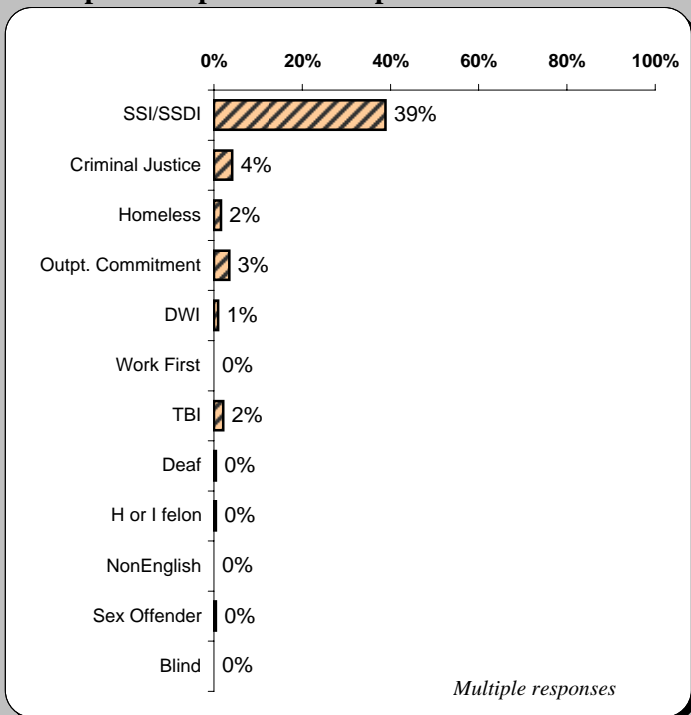


## 2-3: IPRS Target Populations at Update

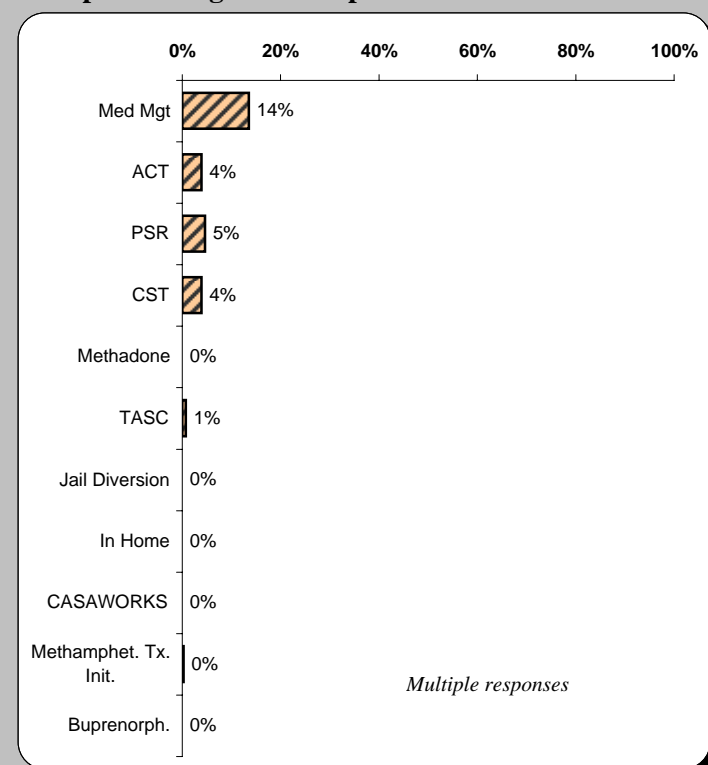


Note: See appendix for definitions of acronyms used on this page.

## 3-1: Special Populations at Update



## 3-2: Special Programs at Update

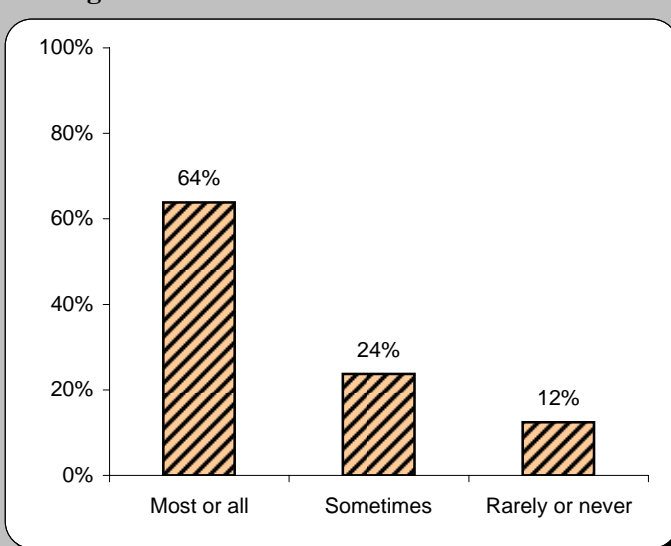


## 3-3: DSM-IV Diagnoses at Update

Diagnostic Category	
Major depression	46%
Bipolar disorder	14%
Schizophrenia	31%
Anxiety disorder	9%
PTSD	5%
Personality disorder	7%
Alcohol abuse	6%
Alcohol dependence	6%
Drug abuse	10%
Drug dependence	10%

Only most common diagnoses shown. Multiple response

## 3-4: Attendance at Scheduled Treatment Sessions, During Treatment Since Last Interview

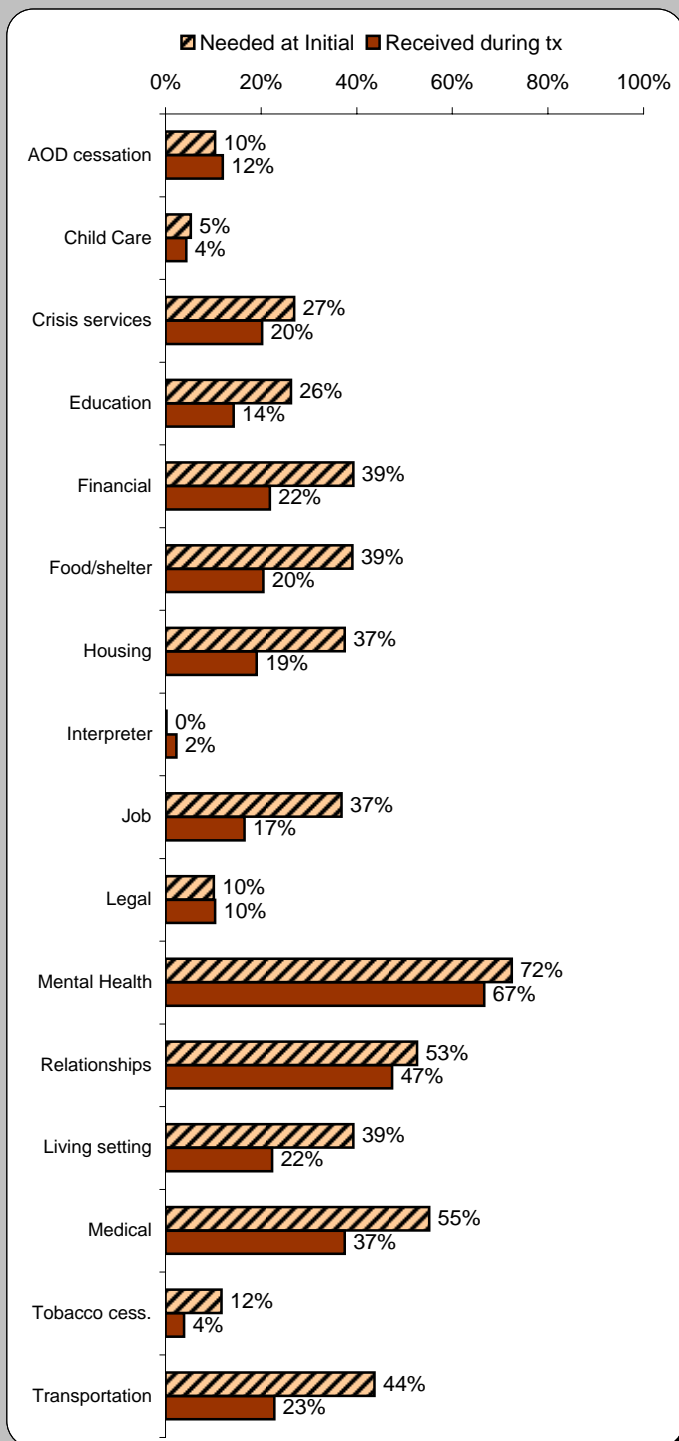


## 3-5: Family Involvement with Staff Concerning Treatment Services and/or Person-Centered Planning (PCP) During Past 3 Months of Treatment

Family Involvement with...	
Treatment Services and/or PCP	42%
Treatment Services	37%
Personal Care Plan	26%

## 4-1: Services Needed and Received

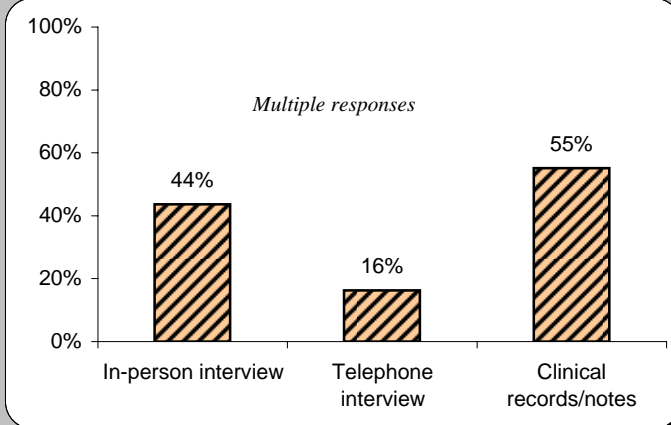
This chart compares information from the Initial Interview about whether a service area is very important to information from the Update Interview about whether the service was received during treatment.



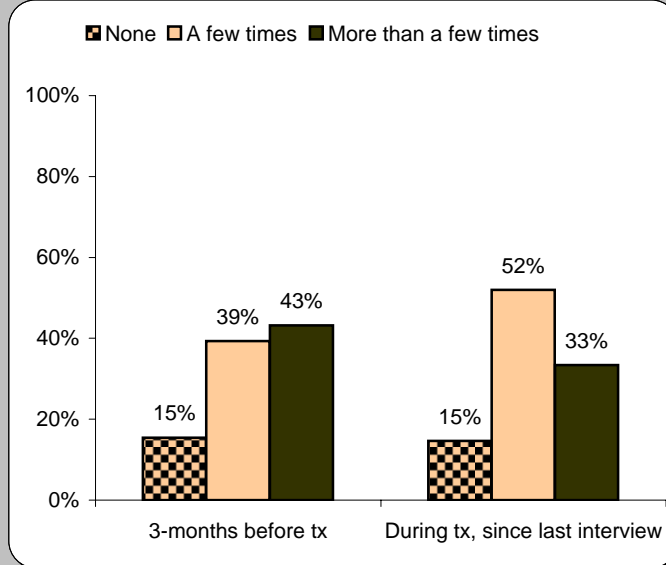
## Part II

Charts and Graphs 4-2 thru 5-9 show consumers' employment, daily activities, living situation, substance use, and arrests. Some graphs and tables compare information collected at the Initial Interview with information collected in the Update Interview. Initial Interview information is designed to be collected by means of a personal interview with the consumer. The preferred method for completing the Update items in this section is a personal interview; however, a telephone interview, or clinical records or notes are also used. The following chart shows how it was completed for the current group of consumers:

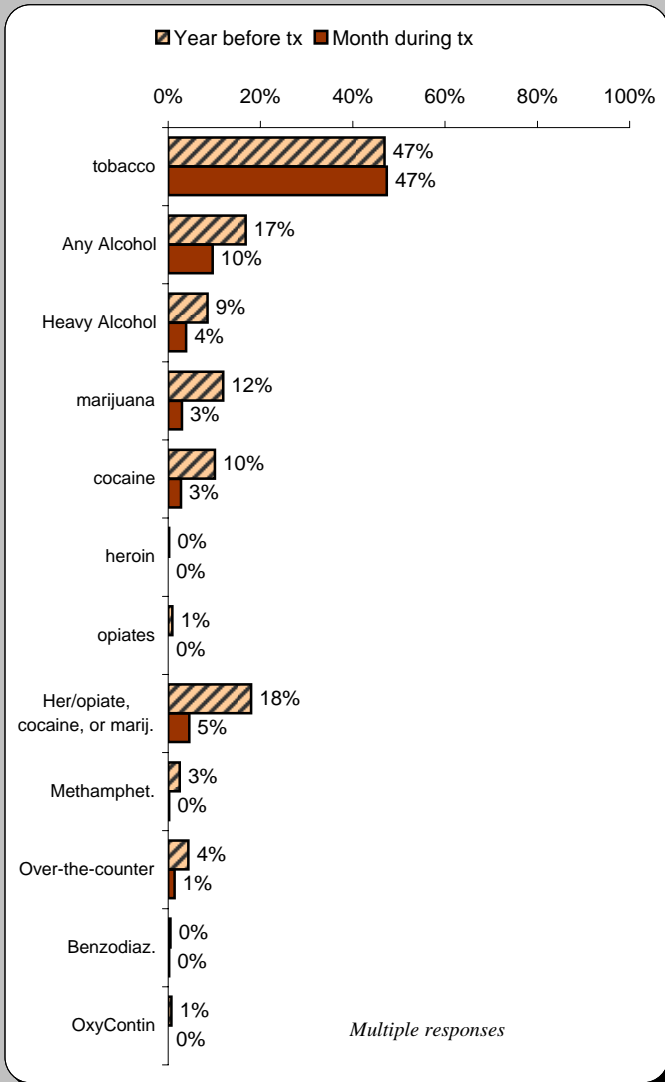
## 4-2 Update Interview Data Collection Method



## 4-3: How Often Problems Interfere with Work, School, or Other Daily Activities



### 5-1: Substance Use in Past Month



### 5-2: Cigarette Smoking

	Month before tx	Month during tx
Smoke cigarettes	46%	46%
Smoke a pack a day or more	17%	17%

### 5-3 Homeless Consumers

	3-Months before tx	During tx past 3 months
In Shelters	3	3
Not in Shelters	1	3
Total Homeless	4	6

### 5-4: Employment

	3-Months before tx	Month during tx
% In labor force	52%	54%
Of those in the labor force...		
Employed full-time	18%	20%
Employed part-time	28%	28%
Unemployed (seeking work)	54%	52%
Of those working...		
Supported employment	22%	17%
Transitional employment	9%	7%

### 5-5: Justice System Involvement

7% of Eastpointe consumers were under correctional supervision at the time of their Update Interview.

### 5-6: Arrests

	Month before tx	Month during tx
Any arrest	2%	2%
Misdemeanor arrest	2%	2%
Felony arrest	1%	0%

### 5-7: Children Under 18

28% of Eastpointe consumers have children under age 18.

### 5-8: Custody Issues During Treatment

	# Since Last Interview
Gained custody of child(ren)	3
Lost custody	5
Began seeking custody	5
Stopped seeking custody	0
Continued seeking custody	10
New baby removed from custody	0

### 5-9: DSS Investigations During Treatment

	# Since Last Interview
Consumer investigated by DSS for child abuse or neglect	17
Investigation was due to infant testing positive on drug screen	1

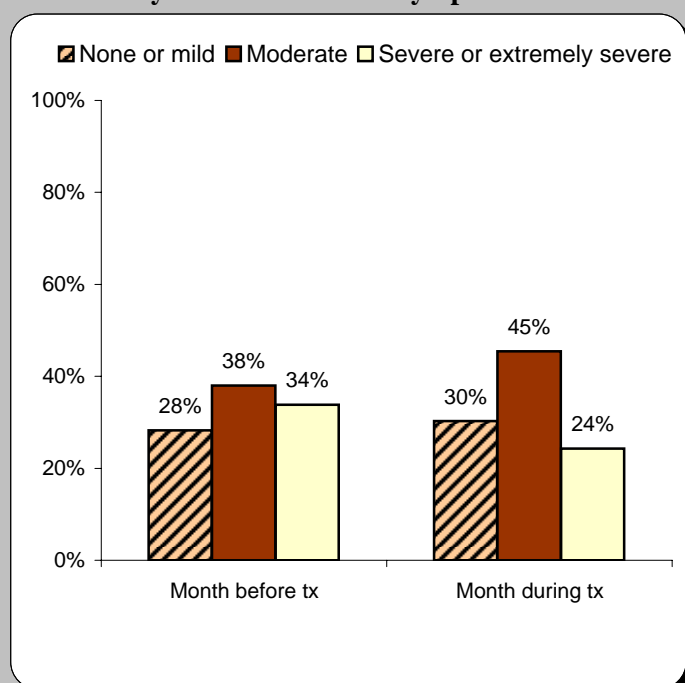


## Part III

Charts and Graphs 6-1 thru 7-3 compare Initial Interview information with information from Section III of the Update Interview. Section III has questions that must be answered by the consumer. If the consumer is not available, these items are skipped and left blank. Therefore, these items often represent the responses of fewer consumers.

**\* 218 of the 435 (50%) of Eastpointe Update Interviews included a personal interview with the consumer.**

### 6-1: Severity of Mental Health Symptoms



### 6-2: Psychotropic Medications at Update

82% of Eastpointe consumers have a current prescription for psychotropic medications. Of those, 85% take their medication as prescribed all or most of the time.

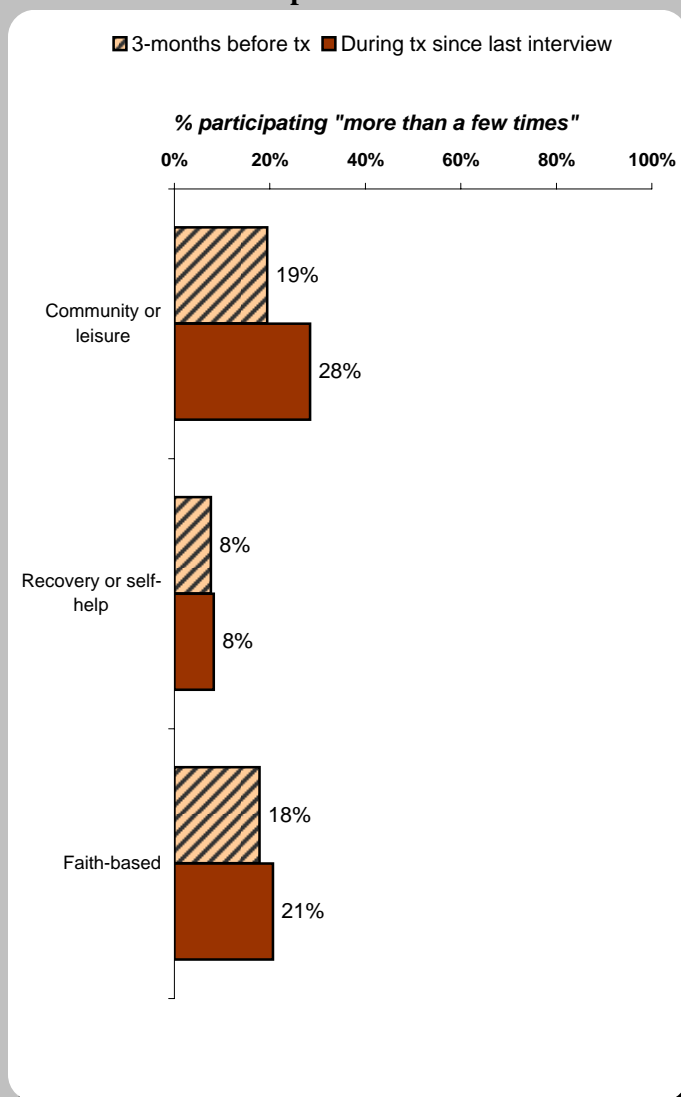
### 6-3: Experienced Violence

	3 Months before tx	During tx, since last interview
Physical violence	8%	4%
Sexual violence	1%	2%

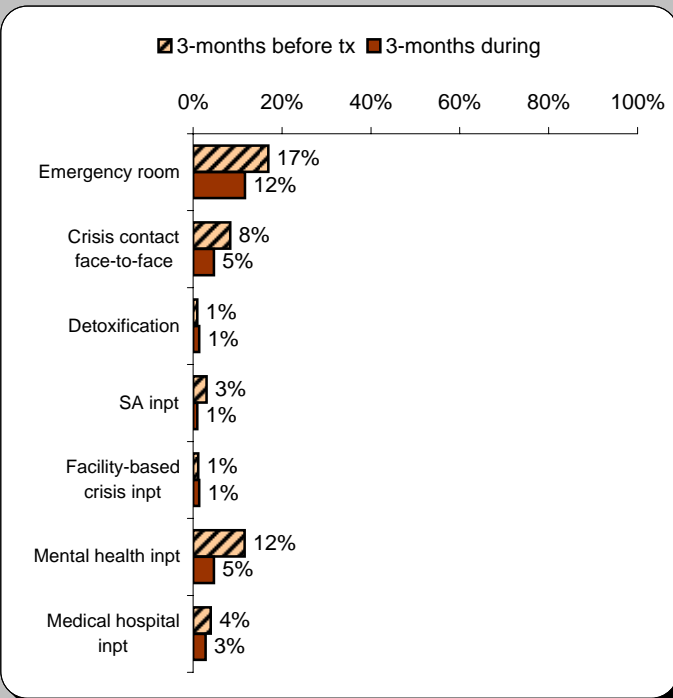
### 6-4: Behavior Problems and Symptoms

	During tx, 3 Months since last before tx interview	
Suicidal thoughts	28%	15%
Tried to hurt or cause self pain	9%	6%
Risky Sexual activity	5%	5%
Hit/physically hurt another person	10%	7%

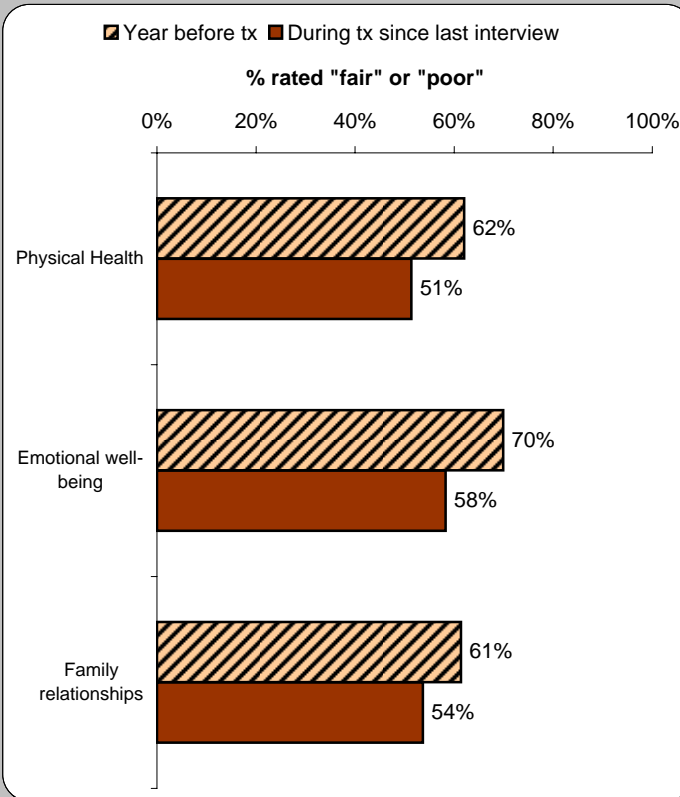
### 6-5: Consumer Participation in Positive Activities



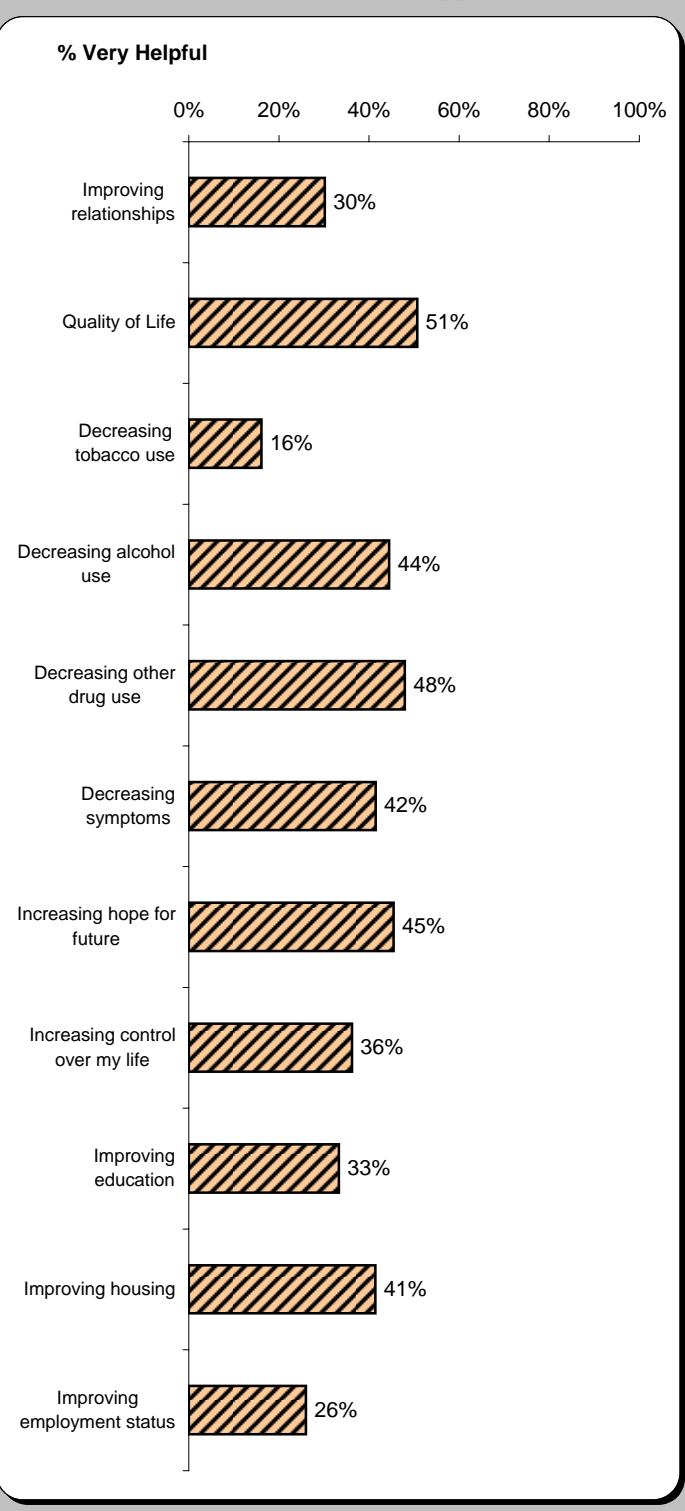
**7-1: Health Care Received**



**7-2: Consumer Ratings on Quality of Life**



**7-3: Helpfulness of Program Services  
(of those for whom the service is applicable)**



Note: Zero percent may indicate not applicable for all consumers.

<b>Acronym or Term</b>	<b>Definition</b>
ACT	Assertive Community Treatment
ADMRI	Target population: Adult with both mental retardation and mental illness
ADSN	Target population: Adult with Developmental Disability
Af American	African American
AMOLM	Target population: Adult consumer receiving Olmstead services
AMPAT	Target population: Adult MH consumer who is homeless (PATH program).
AMSMI	Target population: Adult with serious mental illness
AMSPM	Target population: Adult with serious and persistent mental illness
AOD	Alcohol or other drugs
ASCDR	Target population: Adult SA injection drug user at risk for communicable disease
ASCJO	Target population: Adult SA who is a criminal justice offender
ASDHH	Target population: Adult SA consumer who is deaf or hard of hearing
ASDSS	Target population: Adult SA consumer who is involved with DSS
ASDWI	Target population: Adult SA consumer who is receiving DWI offender treatment
ASHMT	Target population: Adult with a chronic substance abuse disorder
ASHOM	Target population: Adult SA consumer who is homeless
ASWOM	Target population: Adult SA consumer who is pregnant or has dependent children
Assessmt	Assessment
Benzodiaz.	Benzodiazepine(s)
Buprenorph.	Buprenorphine
CASAWORKS	Residential program initiative designed to help substance abusing women
Cauc.	Caucasian
Crim. Justice or CJ	Criminal Justice
CST	Community support team
Detox	Detoxification
DSM	Diagnostic and Statistical Manual (Edition IV)
DSS	Division of Social Services
DWI	Driving while Impaired
GED	General Education Diploma (High School Equivalency)
H or I felon	Class H or I felon (controlled substance) who applied for food stamps
Her	Heroin
HS	High School
Inpt.	Inpatient
Marij.	Marijuana
Med. Mgmt.	Psychiatric medication management services
Methamphet.	Methamphetamine(s)
Methamphet. Tx. Init.	Methamphetamine Treatment Initiative
MH	Mental Health
Outpt. Commitment	Outpatient Commitment
PSR	Psychosocial rehabilitation
PTSD	Post-traumatic Stress disorder
SA	Substance Abuse or Substance Abuser
SSI/SSDI	Supplemental Security Income or Social Security Disability Insurance
TASC	Treatment Accountability for Safer Communities
TBI	Traumatic brain injury
Tx	Treatment
Work First	DSS program for temporary assistance to needy families

Note; Refer to web page for more complete definitions of target populations:

<http://www.dhhs.state.nc.us/mhdd/sas>